

An Independent Insurance Corporation

COMMERCIAL

PERSONAL

LIFE

HEALTH

BONDS

GROUP BENEFITS

2520042392938

U.S. DEPT. OF LAB.
P/WBA/PUBLIC DISCLOS
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March 28, 2001

CERTIFIED MAIL/RETURN RECEIPT REQUESTED

Top Hat Plan Exemption
Pension and Welfare Benefits Administration
Room N-5644
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, D.C. 20210

To the Secretary of Labor:

In compliance with the requirements of the alternative method of reporting and disclosure under Part 1 of Title I of the Employee Retirement Income Security Act of 1974 for unfunded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 C.F.R. § 2520.104-23, the following information is provided by the undersigned employer.

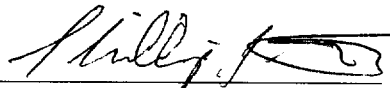
Name and Address of Employer: **Dwight W. Andrus Insurance, Inc.
5501 Johnston Street
Lafayette, LA 70503**

Employer Identification Number: 72-0490849
Dwight W. Andrus Insurance, Inc. maintains a plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

Number of Plans and Participants in Each Plan: One (1) Plan covering two (2) Employees

Dated March 28, 2001.

DWIGHT W. ANDRUS
INSURANCE, INC.

By 
Phil Garzotto, Plan Administrator

MAIN OFFICE:

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